

ANNUAL REPORT TO THE  
TWENTY-FIRST LEGISLATURE  
STATE OF HAWAI'I  
2002

IN COMPLIANCE WITH  
ACT 41,  
SESSION LAWS OF HAWAI'I 1992  
ESTABLISHING THE  
PRIMARY HEALTH CARE INCENTIVE PROGRAM  
AND THE PRIMARY CARE ROUNDTABLE

PREPARED BY:  
DEPARTMENT OF HEALTH  
STATE OF HAWAI'I  
DECEMBER 2001

## **BACKGROUND**

The State Legislature established a Primary Health Care Incentive Program through Act 41 of the Session Laws of Hawai'i 1992. This program was established within the Department of Health to assess and develop strategies to address the primary health care needs of medically underserved populations of Hawai'i. An integral component of this program was the creation of the Primary Care Roundtable which is a volunteer group composed of individuals interested in primary care issues. Its membership includes consumer advocates, professionals from the private health and social services sector, and representatives from the public sector. The mission of the Roundtable is to promote access to comprehensive, integrated community-based primary health care for all the people of Hawai'i. It acts in an advisory capacity to the Department of Health and the Legislature on primary health care issues.

The Family Health Services Division of the Department of Health provides staff support for the Roundtable. Funding for the staff comes primarily through the federal Primary Care Office and the State Systems Development Initiative grants. No funds are allocated by the state for the Roundtable.

Statewide meetings of the Roundtable are usually held quarterly via interactive television and video teleconferencing provided at the State Video Conference Centers and the University of Hawai'i Interactive Television System. Also included are twelve rural hospital sites of the Hawai'i Health Systems Corporation. Supplemental meetings and briefings can be called whenever appropriate.

## **ACTIVITIES OF THE ROUNDTABLE FOR 2001**

- 1) The Roundtable provided a forum for discussion and sharing of experiences on the following issues and topics:
  - Collaborative initiatives of the Hawai'i Health Systems Corporation (HHSC) to provide and enhance accessible comprehensive health care services.
  - Community development activities on Kaua'i which included the establishment of a Community Health Center in November 2001.
  - Comprehensive Rural Health Program for the state which involves input from community meetings statewide.

- Community development activities in Ko 'olau Loa and O'ahu to enhance primary care services.
  - Oral health needs for the state with emphasis on the Big Island, which has been designated as a low-income dental health professional shortage area.
  - Department of Health Primary Care purchase-of-service contracts for the uninsured to community based providers.
  - Hawai'i Uninsured Project, a program of the Hawai'i Medical Services Association (HMSA) Foundation which addresses the problem of the uninsured in Hawai'i.
  - Concerns of Community Health Centers (CHC) that increasing numbers of unemployed and uninsured may lead to a greater strain on CHCs.
  - Federal designations for Hawai'i – Medically Underserved Area/Population (MUP/A); Health Professional Shortage Areas (HPSA) for primary care, dental and mental health. These designations can bring additional federal resources to the state.
  - Fluoridation bill which is still in committee from 2001 session and can be brought up again in 2002.
- 2) Roundtable members actively participated in legislative hearings and testimonies on primary care issues.

## **PLAN FOR 2002**

The Roundtable and its membership are committed to continue taking an active role in recommending policy to the Department of Health and the Legislature. Priorities will include the following:

- Increased funding to safety-net providers who serve underserved individuals.
- Improve workforce development activities including recruitment, retention and training of health professionals.
- Expanded telehealth activities statewide, especially to rural areas.
- Improved oral health services for the underserved populations.